

<i>SERFF Tracking Number:</i>	<i>GRTT-126717046</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>United National Life Insurance Company of America</i>	<i>State Tracking Number:</i>	<i>46186</i>
<i>Company Tracking Number:</i>	<i>UNLMZ2011_AR</i>		
<i>TOI:</i>	<i>MS05I Individual Medicare Supplement - Standard Plans</i>	<i>Sub-TOI:</i>	<i>MS05I.001 Plan A</i>
<i>Product Name:</i>	<i>Standardized Medicare Supplement Rate Filing</i>		
<i>Project Name/Number:</i>	<i>/</i>		

## Filing at a Glance

Company: United National Life Insurance Company of America

Product Name: Standardized Medicare Supplement Rate Filing      SERFF Tr Num: GRTT-126717046      State: Arkansas

TOI: MS05I Individual Medicare Supplement - Standard Plans

Sub-TOI: MS05I.001 Plan A      SERFF Status: Closed-Approved-Closed      State Tr Num: 46186

Filing Type: Rate

Co Tr Num: UNLMZ2011\_AR

State Status: Approved-Closed

Author: Linda David

Reviewer(s): Stephanie Fowler

Date Submitted: 07/13/2010

Disposition Date: 07/22/2010

Disposition Status: Approved-Closed

Implementation Date Requested: On Approval

Implementation Date: 07/22/2010

State Filing Description:

## General Information

Project Name:

Status of Filing in Domicile: Pending

Project Number:

Date Approved in Domicile:

Requested Filing Mode:

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact: 10%

Group Market Type:

Filing Status Changed: 07/22/2010

Explanation for Other Group Market Type:

State Status Changed: 07/22/2010

Deemer Date:

Created By: Linda David

Submitted By: Linda David

Corresponding Filing Tracking Number:

Filing Description:

Annual loss ratio and rate revision for Standardized Medicare Supplement plans.

## Company and Contact

### Filing Contact Information

Linda David, Product Analyst

SERFF Tracking Number: GRIT-126717046 State: Arkansas  
 Filing Company: United National Life Insurance Company of America State Tracking Number: 46186  
 Company Tracking Number: UNLMZ2011\_AR  
 TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A  
 Standard Plans  
 Product Name: Standardized Medicare Supplement Rate Filing

Project Name/Number: /  
 1275 MILWAUKEE AVE 847-904-5639 [Phone]  
 GLENVIEW, IL 60025

### Filing Company Information

United National Life Insurance Company of America CoCode: 92703 State of Domicile: Illinois  
 1275 Milwaukee Ave. Group Code: 903 Company Type:  
 Glenview, IL 60025 Group Name: State ID Number:  
 (847) 803-5252 ext. [Phone] FEIN Number: 37-1095206

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### Filing Fees

Fee Required? Yes  
 Fee Amount: \$200.00  
 Retaliatory? No  
 Fee Explanation: \$50 per form  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United National Life Insurance Company of America	\$200.00	07/13/2010	37921439

SERFF Tracking Number: GRTT-126717046 State: Arkansas

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TOI: MS05I Individual Medicare Supplement - Standard Plans Sub-TOI: MS05I.001 Plan A

Product Name: Standardized Medicare Supplement Rate Filing

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	07/22/2010	07/22/2010

### Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Supporting Document	Health - Actuarial Justification	Linda David	07/13/2010	07/13/2010
Supporting Document	cover letter	Linda David	07/13/2010	07/13/2010

## Disposition

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document ( <i>revised</i> )	Health - Actuarial Justification	Approved	No
Supporting Document	Health - Actuarial Justification	Replaced	No
Supporting Document ( <i>revised</i> )	cover letter	Accepted for Informational Purposes	Yes
Supporting Document	cover letter	Replaced	Yes
Supporting Document	Appendix A	Approved	No
Supporting Document	Exhibit 2	Approved	No
Supporting Document	Rates	Approved	Yes

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**Amendment Letter**

Submitted Date: 07/13/2010

**Comments:**

We had to make minor changes to our cover letter and rate memorandum. Attached are the revised materials.

Thank you for your attention to this filing.

Linda David

**Changed Items:**

**Supporting Document Schedule Item Changes:**

**Satisfied -Name: Health - Actuarial Justification**

Comment:

AR-RM\_rev\_71310.pdf

**User Added -Name: cover letter**

Comment:

AR-LTR\_rev\_071310.pdf

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## Supporting Document Schedules

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> cover letter	Accepted for Informational Purposes	07/22/2010
<b>Comments:</b>		
<b>Attachment:</b>		
AR-LTR_rev_071310.pdf		

	<b>Item Status:</b>	<b>Status Date:</b>
<b>Satisfied - Item:</b> Rates	Approved	07/22/2010
<b>Comments:</b>		
<b>Attachment:</b>		
UNL_MedSupp_New_MOO_ AR.pdf		



**United National Life Insurance Company of America**  
**P. O. Box 1154 . Glenview, Illinois 60025-1154 . 1-800-207-8050**

July 13, 2010

Ms. Julie Benafield Bowman  
Arkansas Department of Insurance  
Seniors Insurance Network  
1200 West 3rd St.  
Little Rock, AR 72201-1904

Re: Loss Ratio & Rate Revision Filing - Standardized Medicare Supplement Forms  
N.A.I.C. Company Code 92703  
Federal ID Number 37-1095206  
Company Filing Number UNLMZ2011AR

Dear Ms. Bowman:

We filed this yesterday, but need to amend the cover letter to include form U9741F. The rates are identical to the U1041F rates. A new actuarial memorandum is also enclosed. Per our earlier memo, please find a loss ratio and rate revision filing for our standardized Medicare Supplement forms. There are 2 policyholders currently in force in your state with a current annual premium of \$1,350. The prior rate history for these forms is shown in the enclosed rate memorandum. The affected forms and requested increases are as follows:

Form	U9741F	U1041A	U1041D	U1041F	U1041G	All
Request	10%	10%	5%	10%	5%	10.0%

Your attention to this filing is greatly appreciated. If you have any questions, please call me at 1-847-904-5639, fax me at 1-847-699-0093 or e-mail me at [Linda\\_David@gtlic.com](mailto:Linda_David@gtlic.com).

Sincerely,

United National Life Insurance Company

Linda David  
Corporate Actuarial

Encl.



**United National Life Insurance Company**  
**Standardized Medicare Supplement Attained Age Premium Rates**  
**Annual Rates - Effective 2011**  
**Base Rates**  
**Arkansas**

	Preferred					Standard			
Age	Plan A	Plan D	Plan F	Plan G		Plan A	Plan D	Plan F	Plan G
All Ages	1,395.24	1,750.14	1,995.84	1,786.68		1,550.23	1,944.60	2,217.60	1,985.24

A discount factor of 0.93 is applied for married applicants

<u>Zip Codes</u>	<u>Area Factors</u>
720-722	0.93
716-719, 723-729	0.80

**United National Life Insurance Company**  
**Standardized Medicare Supplement Attained Age Premium Rates**  
**Monthly Rates - Effective 2011**  
**Base Rates**  
**Arkansas**

	Preferred					Standard			
Age	Plan A	Plan D	Plan F	Plan G		Plan A	Plan D	Plan F	Plan G
All Ages	116.30	145.80	166.30	148.90		129.20	162.00	184.80	165.40

A discount factor of 0.93 is applied for married applicants

<u>Zip Codes</u>	<u>Area Factors</u>
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716-719, 723-729	0.80

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## Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
07/12/2010		Supporting cover letter Document	07/13/2010	AR-LTR.pdf (Superceded)



**United National Life Insurance Company of America**  
**P. O. Box 1154 . Glenview, Illinois 60025-1154 . 1-800-207-8050**

July 12, 2010

Ms. Julie Benafield Bowman  
Arkansas Department of Insurance  
Seniors Insurance Network  
1200 West 3rd St.  
Little Rock, AR 72201-1904

Re: Loss Ratio & Rate Revision Filing - Standardized Medicare Supplement Forms  
N.A.I.C. Company Code 92703  
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Sincerely,

United National Life Insurance Company

Linda David  
Corporate Actuarial

Encl.